

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 12

## BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> <b>MIKE GRAVEL FOR PRESIDENT 2008</b>		<b>2. IDENTIFICATION NUMBER</b> C00423202	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1600 N OAK ST #1412			
<b>CITY, STATE, and ZIP CODE</b> ARLINGTON                      VA                      22209		<b>3. IS THIS REPORT FOR :</b> <input type="checkbox"/> Primary <input type="checkbox"/> General	

**4. TYPE OF REPORT** (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report  
☒ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_

☐ Thirtieth day report following the General Election on \_\_\_\_\_  
 on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT      ☐ YES      ☒ NO

5. COVERING PERIOD	FROM 04/01/2010	THROUGH 06/30/2010
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<b>SUMMARY</b>	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD .....	440.94
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) .....	0.00
	8. SUBTOTAL (Lines 6 and 7) .....	440.94
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	36.00
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) .....	404.94
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	682.26
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) .....	14701.20
	13. EXPENDITURES SUBJECT TO LIMITATION .....	171853.71
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	0.00
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) .....	171853.71

**I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.**

Type or Print Name of Treasurer <b>MIKE GRAVEL</b>	Date 07/18/2010
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Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b>	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100
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**FEC FORM 3P**  
**(01/2001)**

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**MIKE GRAVEL FOR PRESIDENT 2008**

Report Covering the Period

From: 04/01/2010

To: 06/30/2010

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	215966.74
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	.....	0.00	0.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	0.00
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	.....	0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	252.35
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	0.00	216219.09
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	36.00	171853.71
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	44615.73
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	44615.73
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	0.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	36.00	216469.44
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

3 / 12

**1. NAME OF COMMITTEE (in full)****MIKE GRAVEL FOR PRESIDENT 2008****ADDRESS (number and street)**

1600 N OAK ST #1412

**CITY, STATE, and ZIP CODE**

ARLINGTON

VA

22209

**2. IDENTIFICATION NUMBER**

C00423202

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 4 / 12

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City  
Charlotte

State  
NC

Zip Code  
28262

Purpose of Disbursement  
BANK CHARGES

101

Category/  
Type

Candidate Name  
MIKE GRAVEL FOR PRESIDENT 2008

Office Sought: ☐ House  
☐ Senate  
☒ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.20800

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.00

SUBTOTAL of Disbursements This Page (optional) .....

12.00

TOTAL This Period (last page this line number only) .....

12.00

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 5 / 12

FOR LINE NUMBER:  
(check only one)

<input checked="checked" type="checkbox"/>	11
<input type="checkbox"/>	12

NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Paypal Inc

Nature of Debt (Purpose):  
BALANCE IN PAYPAL NOT YET  
TRANSFERRED

Mailing Address 7615 37th Ave

City	State	ZIP Code
Jackson Heights	NY	11372

Outstanding Balance Beginning This Period

24.74

Transaction ID: SD11.20545

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.74

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Paypal Inc

Nature of Debt (Purpose):  
PAYPAL DONATIONS NOT YET  
TRANSFERRED

Mailing Address 7615 37th Ave

City	State	ZIP Code
Jackson Heights	NY	11372

Outstanding Balance Beginning This Period

151.37

Transaction ID: SD11.20546

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

151.37

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Paypal Inc

Nature of Debt (Purpose):  
PAYPAL DONATIONS NOT YET  
TRANSFERRED

Mailing Address 7615 37th Ave

City	State	ZIP Code
Jackson Heights	NY	11372

Outstanding Balance Beginning This Period

506.15

Transaction ID: SD11.20547

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

506.15

1) **SUBTOTALS** This Period This Page (optional).....

682.26

2) **TOTALS** This Period (last page this line number only).....

682.26

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

682.26

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 6 / 12

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):  
CONSULTING FOR LEGAL SERV-  
ICES - MAR 09

Mailing Address 1825 EYE STREET NW

City State ZIP Code  
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

344.00

Transaction ID: SD12.20743

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

344.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):  
LEGAL SERVICES

Mailing Address 1825 EYE STREET NW

City State ZIP Code  
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

590.72

Transaction ID: SD12.20775

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

590.72

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DICKSTEIN SHAPIRO LLPNature of Debt (Purpose):  
LEGAL SERVICES JUNE 2009

Mailing Address 1825 EYE STREET NW

City State ZIP Code  
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

3274.60

Transaction ID: SD12.20776

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3274.60

1) **SUBTOTALS** This Period This Page (optional).....

4209.32

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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numbered line)

PAGE 7 / 12

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DICKSTEIN SHAPIRO LLP

Nature of Debt (Purpose):  
LEGAL FEES JULY 2009

Mailing Address 1825 EYE STREET NW

City State ZIP Code  
WASHINGTON DC 20006

Outstanding Balance Beginning This Period

1441.88

Transaction ID: SD12.20768

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1441.88

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MIKE GRAVEL

Nature of Debt (Purpose):  
EXPENSE REIMBURSEMENT HQ  
RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code  
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20649

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MIKE GRAVEL

Nature of Debt (Purpose):  
EXPENSE REIMBURSEMENT HQ  
RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code  
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20650

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional).....

1941.88

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 8 / 12

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 MIKE GRAVEL

 Nature of Debt (Purpose):  
 EXPENSE REIMBURSEMENT HQ  
 RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20651

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 MIKE GRAVEL

 Nature of Debt (Purpose):  
 EXPENSE REIMBURSEMENT HQ  
 RENTAL

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20652

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 MIKE GRAVEL

 Nature of Debt (Purpose):  
 EXPENSE REIMBURSEMENT HQ  
 RENTAL/STORAGE

Mailing Address 1600 NO OAK ST APT 1412

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20653

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional).....

750.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 9 / 12

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MIKE GRAVELNature of Debt (Purpose):  
EXPENSE REIMBURSEMENT HQ  
RENTAL/STORAGE

Mailing Address 1600 NO OAK ST APT 1412

City State ZIP Code  
ARLINGTON VA 22209

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20654

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KG INTERNATIONALNature of Debt (Purpose):  
CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City State ZIP Code  
BRISTOW VA 20136

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD12.20781

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KG INTERNATIONALNature of Debt (Purpose):  
CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City State ZIP Code  
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2000.00

Transaction ID: SD12.20769

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional).....

2750.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 10 / 12

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KG INTERNATIONALNature of Debt (Purpose):  
CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City State ZIP Code  
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2000.00

Transaction ID: SD12.20770

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KG INTERNATIONALNature of Debt (Purpose):  
CONSULTING ACCOUNTING

Mailing Address 11311 TRENTON CT

City State ZIP Code  
BRISTOW VA 20136

Outstanding Balance Beginning This Period

2000.00

Transaction ID: SD12.20771

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
JOE LAURIANature of Debt (Purpose):  
CONSULTING FEES NATL PUBL-  
ICITY DIRECTORMailing Address 205 PINEHURST AVE  
#6JCity State ZIP Code  
NEW YORK NY 10033

Outstanding Balance Beginning This Period

50.00

Transaction ID: SD12.20430

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

1) **SUBTOTALS** This Period This Page (optional).....

4050.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 11 / 12

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TROY ASSOCIATESNature of Debt (Purpose):  
RENTAL CAMPAIGN STORAGE

Mailing Address 1916 Wilson Boulevard

City State ZIP Code  
Arlington, VA 22201

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20780

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TROY ASSOCIATESNature of Debt (Purpose):  
Storage Rental

Mailing Address 1916 Wilson Boulevard

City State ZIP Code  
Arlington, VA 22201

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20790

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TROY ASSOCIATESNature of Debt (Purpose):  
Storage Rental

Mailing Address 1916 Wilson Boulevard

City State ZIP Code  
Arlington, VA 22201

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20791

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

1) **SUBTOTALS** This Period This Page (optional).....

750.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 12 / 12

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TROY ASSOCIATES

Nature of Debt (Purpose):  
Storage Rental

Mailing Address 1916 Wilson Boulevard

City State ZIP Code  
Arlington, VA 22201

Outstanding Balance Beginning This Period

250.00

Transaction ID: SD12.20792

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

**1) SUBTOTALS** This Period This Page (optional).....

250.00

**2) TOTALS** This Period (last page this line number only).....

14701.20

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

14701.20